

2002 FORM MO-PTS

Attachment Sequence No. 1040-07 and 1040P-01

	THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-1040P.						
NAME	LAST NAME		FIRST NAME	INITIAL	BIRTHDATE	SOCIAL	SECURITY NO.
Ž	SPOUSE'S LAST NA	AME	FIRST NAME	INITIAL	BIRTHDATE	SPOUSE	S SOCIAL SECURITY NO.
SI	You must check a qualification to be eligible for a credit. Check only one. Copies of letters, forms, etc., must be included with claim.						
QUALIFICATIONS	 □ A. 65 years of age or older (Attach a copy of Form SSA-1099.) □ B. 100% Disabled Veteran (Attach a copy of the □ C. 100% Disabled (Attach a copy of Security Administration or Form SSA-1099.) □ D. 60 years of age or older and recent security Administration or Form SSA-1099. 					Form SSA received su	A-1099.) rviving spouse
	letter from Department of Veteran's Affairs.) benefits. (Attach a copy of Form SSA-1099.)						
FII	LING STATUS	☐ Single ☐	Married — Filing Combined	☐ Married — Living Sep	arate for Entire Year	you must	report both incomes.
Failure to provide proper supporting documentation (lease agreement(s), tax receipt(s), 1099(s), W-2(s), etc.) will result in denial or delay of your claim! Items listed below in red MUST be attached to claim if that line has an amount entered on it.							
1	. Enter the am	ount of income fro	m Form MO-1040, Line 6, OR	Form MO-1040P, Line 4.		1	00
	. Enter the amo	ount of social securi	by benefits before any deduction efits. Attach Form SSA-1099 a	s and/or the amount of socia		2	00
3	3. Enter the total amount of pensions, annuities, dividends, or interest income not included in Line 1. Include tax exempt interest from Form MO-A, Part 1, Line 6 (if filing Form MO-1040). Attach Forms W-2(s), 1099(s), 1099-R(s), 1099-DIV, 1099-INT, 1099-MISC, etc.					3	00
4	Enter the amount of railroad retirement benefits (not included in Line 2) before any deductions. Attach Form RRB/1099-R (Tier II). If filing Form MO-1040, refer to Form MO-A, Part 1, Line 8					4	00
5	Enter the amount of veteran's payments or benefits before any deductions. Attach letter from Veteran's Affairs.					5	00
6	public assistar Attach letter	nce, SSI, child supp from SSA, letter fr	y you and/or your minor childre ort, or Temporary Assistance (T om Social Services, letter from	A) payments. n DCSE,		6	00
7		Enter the amount of nonbusiness loss(es). You must include nonbusiness losses in your household income here. (Include capital loss from Federal Form 1040, Line 13.)					
8		TOTAL household income — Add Lines 1 through 7. Enter total here.					00
9	. Enter \$2,000 i	Enter \$2,000 if you are married and filing a combined claim with your spouse; otherwise, enter "0".					00
10			ct Line 9 from Line 8. If the tot Do not file this claim.			10	00
11	assessments. home busines	(Complete the reass, or share your h	e total amount of real estate tax il estate tax worksheet if you ow ome.) Attach a copy of PAID ir home is on more than five a	vn more than five acres, a n real estate tax receipt(s) a	nobile home, and Form 948,	11	00
12	right. (If total explanation.)	yearly rent is more	amount from Form MO-CRP(s), Le than Line 8, attach rent payn CRP and lease agreement(s), m landlord.	nent	x 20% =	12	00
13			s 11 and 12 and enter the total			13	00
14	You must use	the chart to see ho	perty Tax Credit Chart to figure w much refund you are allowed 040, Line 38 OR Form MO-104	d.		14	00
		THIS FOR	RM MUST BE ATTACHE	D TO FORM MO-104	IN OR FORM MO	-1040P	